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CONFIRMATION NO. 7519

<b>SERIAL NUMBER</b> 10/804,707	<b>FILING OR 371(c) DATE</b> 03/19/2004 <b>RULE</b>	<b>CLASS</b> 600	<b>GROUP ART UNIT</b> 3737	<b>ATTORNEY DOCKET NO.</b> P04,0086
<b>APPLICANTS</b> Michael Maschke, Lonnerstadt, GERMANY; <b>** CONTINUING DATA *****</b> None <i>EC</i> <b>** FOREIGN APPLICATIONS *****</b> GERMANY 103 13 868.4 03/21/2003 <i>EC</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 06/01/2004</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> GERMANY	<b>SHEETS DRAWING</b> 2	<b>TOTAL CLAIMS</b> 4 <b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> SCHIFF HARDIN LLP Patent Department 6600 Sears Tower 233 South Wacker Drive Chicago, IL60606				
<b>TITLE</b> Catheter for magnetic navigation				
<b>FILING FEE RECEIVED</b> 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	